



1. BeHealthy Partnership – Accountable Care Partnership Plan

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Verify Member Eligibility

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Dates of Eligibility

Click on the Date Range to view Eligibility information for Member ID

Date Range	Eligibility Status
→ 02/07/2018 02/07/2018	MASSEALTH STANDARD

The information below refers to the MASSEALTH STANDARD coverage for 02/07/2018 to 02/07/2018.

Eligibility Restrictive Messages

Restrictive Messages 991 / 991 CERTAIN HSN DENTAL SERVICES AVAILABLE AT COMMUNITY HEALTH CENTERS AND HOSPITAL-BASED HEALTH CENTERS.

List of Managed Care Data (for MCO/ACO)

Name	NPI	Phone	Date Range
→ BEHEALTHY PARTNERSHIP		(800) 786-9999	02/07/2018 02/07/2018

Managed Care Data (for MCO/ACO) Details

Begin Date 02/07/2018 End Date 02/07/2018

Name BEHEALTHY PARTNERSHIP

NPI Phone (800) 786-9999

1573 / 688 BeHealthy Partnership member. BeHealthy Partnership is an Accountable Care Partnership Plan.

Restrictive Messages 1574 / 689 For medical service questions, call 1-800-786-9999.

1575 / 690 For behavioral health service questions and authorizations, call Massachusetts Behavioral Health Partnership at 1-800-495-0086.

1576 / 691 For claims, policy, or billing questions, call 1-800-786-9999.

Member Payment Responsibility Detail

Patient Paid Amount Patient Paid Amount Type

Spend Down Amount

Deductible Amount Deductible Date

Co-pay Status Co-pay Cap Status

Restrictive Messages

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Note: EVS only displays a member's **current** eligibility, not prospective eligibility.

If a member enrolls in a health plan effective March 1, 2018 their new Plan assignment and corresponding messages will not appear in EVS until the date the enrollment takes effect.



2. Berkshire Fallon Health Collaborative – Accountable Care Partnership Plan

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Member Information

Eligibility

Dates of Eligibility

Click on the Date Range to view Eligibility information for Member ID

Date Range	Eligibility Status
➔ 02/07/2018 02/07/2018	CAREPLUS

The information below refers to the CAREPLUS coverage for 02/07/2018 to 02/07/2018.

Eligibility Restrictive Messages

Restrictive Messages 1539 / 991 Certain HSN dental services available at community health centers and hospital-based health centers.

List of Managed Care Data (for MCO/ACO)

Name	NPI	Phone	Date Range
➔ BERKSHIRE FALLON HEALTH COLLABORATI		(855) 203-4660	02/07/2018 02/07/2018

Managed Care Data (for MCO/ACO) Details

Begin Date 02/07/2018

End Date 02/07/2018

Name BERKSHIRE FALLON HEALTH COLLABORATI

NPI

Phone (855) 203-4660

1577 / 692 Berkshire Fallon Health Collaborative member. Berkshire Fallon Health Collaborative is an Accountable Care Partnership Plan.

Restrictive Messages

1578 / 693 For medical service questions, call 1-855-203-4660.

1579 / 694 For behavioral health service questions and authorizations, call Beacon Health Strategies at 1-888-877-7184.

1580 / 695 For claims, policy, or billing questions, call 1-855-203-4660.

Member Payment Responsibility Detail

Patient Paid Amount	Patient Paid Amount Type
Spend Down Amount	
Deductible Amount	Deductible Date
Co-pay Status	Co-pay Cap Status
Restrictive Messages	

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3. BMC HealthNet Plan Community Alliance – Accountable Care Partnership Plan

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→ 02/05/2018 02/05/2018	MASSHEALTH STANDARD

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Eligibility Restrictive Messages

Restrictive Messages

991 / 991 CERTAIN HSN DENTAL SERVICES AVAILABLE AT COMMUNITY HEALTH CENTERS AND HOSPITAL-BASED HEALTH CENTERS.

List of Managed Care Data (for MCO/ACO)

Name	NPI	Phone	Date Range
→ BMC HEALTHNET PLAN COMMUNITY ALLIAN		(888) 566-0010	02/05/2018 02/05/2018

Managed Care Data (for MCO/ACO) Details

Begin Date 02/05/2018

End Date 02/05/2018

Name BMC HEALTHNET PLAN COMMUNITY ALLIAN

NPI

Phone (888) 566-0010

1581 / 696 BMC HealthNet Plan Community Alliance member. BMC HealthNet Plan Community Alliance is an Accountable Care Partnership Plan.

Restrictive Messages 1582 / 697 For medical service questions, call 1-888-566-0010.

1583 / 698 For behavioral health service questions and authorizations, call Beacon Health Strategies at 1-888-217-3501.

1584 / 699 For claims, policy, or billing questions, call 1-888-566-0010.

Member Payment Responsibility Detail

Patient Paid Amount	Patient Paid Amount Type
Spend Down Amount	
Deductible Amount	Deductible Date
Co-pay Status	Co-pay Cap Status

Restrictive Messages

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Perform Another Eligibility Check

Note: EVS only displays a member's **current** eligibility, not prospective eligibility.

If a member enrolls in a health plan effective March 1, 2018 their new Plan assignment and corresponding messages will not appear in EVS until the date the enrollment takes effect.



4. BMC HealthNet Plan Mercy Alliance – Accountable Care Partnership Plan

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→ 02/07/2018 02/07/2018	MASSHEALTH STANDARD

The information below refers to the **MASSHEALTH STANDARD** coverage for 02/07/2018 to 02/07/2018.

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Restrictive Messages 991 / 991 CERTAIN HSN DENTAL SERVICES AVAILABLE AT COMMUNITY HEALTH CENTERS AND HOSPITAL-BASED HEALTH CENTERS.

List of Managed Care Data (for MCO/ACO)

Name	NPI	Phone	Date Range
→ BMC HEALTHNET PLAN MERCY ALLIANCE		(888) 566-0010	02/07/2018 02/07/2018

Managed Care Data (for MCO/ACO) Details

Begin Date 02/07/2018
End Date 02/07/2018

Name BMC HEALTHNET PLAN MERCY ALLIANCE

NPI **Phone** (888) 566-0010

Restrictive Messages

1585 / 700 BMC HealthNet Plan Mercy Alliance member. BMC HealthNet Plan Mercy Alliance is an Accountable Care Partnership Plan.

1586 / 701 For medical service questions, call 1-888-566-0010.

1587 / 702 For behavioral health service questions and authorizations, call Beacon Health Strategies at 1-888-217-3501.

1588 / 703 For claims, policy, or billing questions, call 1-888-566-0010.

Member Payment Responsibility Detail

Patient Paid Amount	Patient Paid Amount Type
Spend Down Amount	
Deductible Amount	Deductible Date
Co-pay Status	Co-pay Cap Status

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5. BMC HealthNet Plan Signature Alliance – Accountable Care Partnership Plan

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Date Range	Eligibility Status
→ 02/07/2018 02/07/2018	MASHEALTH STANDARD

The information below refers to the MASHEALTH STANDARD coverage for 02/07/2018 to 02/07/2018.

Eligibility Restrictive Messages

Restrictive Messages 991 / 991 CERTAIN HSN DENTAL SERVICES AVAILABLE AT COMMUNITY HEALTH CENTERS AND HOSPITAL-BASED HEALTH CENTERS.

List of Managed Care Data (for MCO/ACO)

Name	NPI	Phone	Date Range
→ BMC HEALTHNET PLAN SIGNATURE ALLIAN		(888) 566-0010	02/07/2018 02/07/2018

Managed Care Data (for MCO/ACO) Details

Begin Date	End Date
02/07/2018	02/07/2018

Name BMC HEALTHNET PLAN SIGNATURE ALLIAN

NPI

Phone (888) 566-0010

1589 / 704 BMC HealthNet Plan Signature Alliance member. BMC HealthNet Plan Signature Alliance is an Accountable Care Partnership Plan.

Restrictive Messages 1590 / 705 For medical service questions, call 1-888-566-0010.

1591 / 706 For behavioral health service questions and authorizations, call Beacon Health Strategies at 1-888-217-3501.

1592 / 707 For claims, policy, or billing questions, call 1-888-566-0010.

Member Payment Responsibility Detail

Patient Paid Amount	Patient Paid Amount Type
Spend Down Amount	
Deductible Amount	Deductible Date
Co-pay Status	Co-pay Cap Status

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6. BMC HealthNet Plan Southcoast Alliance – Accountable Care Partnership Plan

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Click on the Date Range to view Eligibility information for Member ID

Date Range	Eligibility Status
02/01/2018 02/01/2018	MASHEALTH STANDARD

The information below refers to the MASHEALTH STANDARD coverage for 02/01/2018 to 02/01/2018.

Eligibility Restrictive Messages

Restrictive Messages

246 / 246 EXEMPT FROM COPAY ON PHARMACY SERVICES UNDER 130 CMR 450.130(D).

186 / 186 EXEMPT FROM COPAY ON NON-PHARMACY SERVICES UNDER 130 CMR 450.130(D).

List of Managed Care Data (for MCO/ACO)

Name	NPI	Phone	Date Range
BMC HEALTHNET PLAN SOUTHCOAST ALLIA		(888) 566-0010	02/01/2018 02/01/2018

Managed Care Data (for MCO/ACO) Details

Begin Date 02/01/2018 End Date 02/01/2018

Name BMC HEALTHNET PLAN SOUTHCOAST ALLIA

NPI Phone (888) 566-0010

1593 / 708 BMC HealthNet Plan Southcoast Alliance member. BMC HealthNet Plan Southcoast Alliance is an Accountable Care Partnership Plan.

Restrictive Messages

1594 / 709 For medical service questions, call 1-888-566-0010.

1595 / 710 For behavioral health service questions and authorizations, call Beacon Health Strategies at 1-888-217-3501.

1596 / 711 For claims, policy, or billing questions, call 1-888-566-0010.

Member Payment Responsibility Detail

Patient Paid Amount	Patient Paid Amount Type
Spend Down Amount	
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7. Fallon 365 Care – Accountable Care Partnership Plan

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Click on the Date Range to view Eligibility information for Member ID

Date Range	Eligibility Status
→ 02/07/2018 02/07/2018	MASSEALTH STANDARD

The information below refers to the MASSEALTH STANDARD coverage for 02/07/2018 to 02/07/2018.

Eligibility Restrictive Messages

Restrictive Messages 991 / 991 CERTAIN HSN DENTAL SERVICES AVAILABLE AT COMMUNITY HEALTH CENTERS AND HOSPITAL-BASED HEALTH CENTERS.

List of Managed Care Data (for MCO/ACO)

Name	NPI	Phone	Date Range
→ FALLON 365 CARE		(855) 508-3390	02/07/2018 02/07/2018

Managed Care Data (for MCO/ACO) Details

Begin Date	02/07/2018	End Date	02/07/2018
Name	FALLON 365 CARE		
NPI		Phone	(855) 508-3390

Restrictive Messages

1597 / 712 Fallon 365 Care member. Fallon 365 Care is an Accountable Care Partnership Plan.

1598 / 713 For medical service questions, call 1-855-508-3390.

1599 / 714 For behavioral health service questions and authorizations, call Beacon Health Options at 1-888-877-7182.

1600 / 715 For claims, policy, or billing questions, call 1-855-508-3390.

Member Payment Responsibility Detail

Patient Paid Amount	Patient Paid Amount Type
Spend Down Amount	
Deductible Amount	Deductible Date
Co-pay Status	Co-pay Cap Status

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8. My Care Family – Accountable Care Partnership Plan

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The information below refers to the **MASSEALTH STANDARD** coverage for 02/07/2018 to 02/07/2018.

Eligibility Restrictive Messages

Restrictive Messages 991 / 991 CERTAIN HSN DENTAL SERVICES AVAILABLE AT COMMUNITY HEALTH CENTERS AND HOSPITAL-BASED HEALTH CENTERS.

List of Managed Care Data (for MCO/ACO)

Name	NPI	Phone	Date Range
→ MY CARE FAMILY		(800) 462-5449	02/07/2018 02/07/2018

Managed Care Data (for MCO/ACO) Details

Begin Date 02/07/2018 End Date 02/07/2018

Name MY CARE FAMILY

NPI Phone (800) 462-5449

Restrictive Messages

1601 / 716 My Care Family member. My Care Family is an Accountable Care Partnership Plan.

1602 / 717 For medical service questions, call 1-800-462-5449.

1603 / 718 For behavioral health service questions and authorizations, call Beacon Health Options at 1-800-414-2820.

1604 / 719 For claims, policy, or billing questions, call 1-800-462-5449.

Member Payment Responsibility Detail

Patient Paid Amount Patient Paid Amount Type

Spend Down Amount

Deductible Amount Deductible Date

Co-pay Status Co-pay Cap Status

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Close **Perform Another Eligibility Check**

Note: EVS only displays a member's **current** eligibility, not prospective eligibility.

If a member enrolls in a health plan effective March 1, 2018 their new Plan assignment and corresponding messages will not appear in EVS until the date the enrollment takes effect.



9. Tufts Health Together with Atrius Health – Accountable Care Partnership Plan

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Verify Member Eligibility

Member Information

Eligibility

Dates of Eligibility

Click on the Date Range to view Eligibility information for Member ID

Date Range	Eligibility Status
→ 02/12/2018 02/12/2018	MASSHEALTH STANDARD

The information below refers to the **MASSHEALTH STANDARD** coverage for 02/12/2018 to 02/12/2018.

Eligibility Restrictive Messages

Restrictive Messages 991 / 991 CERTAIN HSN DENTAL SERVICES AVAILABLE AT COMMUNITY HEALTH CENTERS AND HOSPITAL-BASED HEALTH CENTERS.

List of Managed Care Data (for MCO/ACO)

Name	NPI	Phone	Date Range
→ TUFTS HEALTH TOGETHER WITH ATRIUS H		(888) 257-1985	02/12/2018 02/12/2018

Managed Care Data (for MCO/ACO) Details

Begin Date	02/12/2018	End Date	02/12/2018
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Name TUFTS HEALTH TOGETHER WITH ATRIUS H

NPI

Phone (888) 257-1985

1605 / 720 Tufts Health Together with Atrius Health member. Tufts Health Together With Atrius Health is an Accountable Care Partnership Plan.

Restrictive Messages

1606 / 721 For medical service questions, call 1-888-257-1985.

1607 / 722 For behavioral health service questions and authorizations, call Tufts Health Together With Atrius at 1-888-257-1985.

1608 / 723 For claims, policy, or billing questions, call 1-888-257-1985.

Member Payment Responsibility Detail

Patient Paid Amount	Patient Paid Amount Type
Spend Down Amount	
Deductible Amount	Deductible Date
Co-pay Status	Co-pay Cap Status

Restrictive Messages

Close
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Note: EVS only displays a member's **current** eligibility, not prospective eligibility.

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10. Tufts Health Together with BIDCO – Accountable Care Partnership Plan

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Name	TUFTS HEALTH TOGETHER WITH BIDCO																									
NPI		Phone	(888) 257-1985																							
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	1611 / 726 For behavioral health service questions and authorizations, call Tufts Health Together with BIDCO at 1-888-257-1985.																									
	1612 / 727 For claims, policy, or billing questions, call 1-888-257-1985.																									
<h3>Member Payment Responsibility Detail</h3> <table border="1"> <tbody> <tr> <td>Patient Paid Amount</td> <td>Patient Paid Amount Type</td> </tr> <tr> <td>Spend Down Amount</td> <td></td> </tr> <tr> <td>Deductible Amount</td> <td>Deductible Date</td> </tr> <tr> <td>Co-pay Status</td> <td>Co-pay Cap Status</td> </tr> <tr> <td colspan="2">Restrictive Messages</td> </tr> </tbody> </table>		Patient Paid Amount	Patient Paid Amount Type	Spend Down Amount		Deductible Amount	Deductible Date	Co-pay Status	Co-pay Cap Status	Restrictive Messages																
Patient Paid Amount	Patient Paid Amount Type																									
Spend Down Amount																										
Deductible Amount	Deductible Date																									
Co-pay Status	Co-pay Cap Status																									
Restrictive Messages																										
<div> Close Perform Another Eligibility Check </div>																										

Note: EVS only displays a member's **current** eligibility, not prospective eligibility.

If a member enrolls in a health plan effective March 1, 2018 their new Plan assignment and corresponding messages will not appear in EVS until the date the enrollment takes effect.

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Verify Member Eligibility

Member Information

Eligibility

Dates of Eligibility

Click on the Date Range to view Eligibility information for Member ID

Date Range	Eligibility Status
+ 02/07/2018 02/07/2018	MASShealth Family Assistance

The information below refers to the MASShealth Family Assistance coverage for 02/07/2018 to 02/07/2018.

Eligibility Restrictive Messages

Restrictive Messages 991 / 991 CERTAIN HSN DENTAL SERVICES AVAILABLE AT COMMUNITY HEALTH CENTERS AND HOSPITAL-BASED HEALTH CENTERS.

List of Managed Care Data (for MCO/ACO)

Name	NPI	Phone	Date Range
+ TUFTS HEALTH TOGETHER WITH BOSTON C		(888) 257-1985	02/07/2018 02/07/2018

Managed Care Data (for MCO/ACO) Details

Begin Date	02/07/2018	End Date	02/07/2018
<hr/>			
Name	TUFTS HEALTH TOGETHER WITH BOSTON C		
NPI		Phone	(888) 257-1985
<hr/>			
Restrictive Messages	1613 / 728 Tufts Health Together With Boston Children's ACO member. Tufts Health Together With Boston Children's ACO is an Accountable Care Partnership Plan. 1614 / 729 For medical service questions, call 1-888-257-1985. 1615 / 730 For behavioral health service questions and authorizations, call Tufts Health Together With Boston Children's ACO at 1-888-257-1985. 1616 / 731 For claims, policy, or billing questions, call 1-888-257-1985.		

Member Payment Responsibility Detail

Patient Paid Amount	Patient Paid Amount Type
Spend Down Amount	
Deductible Amount	Deductible Date
Co-pay Status	Co-pay Cap Status
<hr/>	
Restrictive Messages	

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Perform Another Eligibility Check



12. Tufts Health Together with CHA – Accountable Care Partnership Plan

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Verify Member Eligibility

Member Information
Eligibility

Dates of Eligibility

Click on the Date Range to view Eligibility information for Member ID

Date Range	Eligibility Status
→ 02/07/2018 02/07/2018	MASSHEALTH STANDARD

The information below refers to the **MASSHEALTH STANDARD** coverage for 02/07/2018 to 02/07/2018.

Eligibility Restrictive Messages

Restrictive Messages 991 / 991 CERTAIN HSN DENTAL SERVICES AVAILABLE AT COMMUNITY HEALTH CENTERS AND HOSPITAL-BASED HEALTH CENTERS.

List of Managed Care Data (for MCO/ACO)

Name	NPI	Phone	Date Range
→ TUFTS HEALTH TOGETHER WITH CHA		(888) 257-1985	02/07/2018 02/07/2018

Managed Care Data (for MCO/ACO) Details

Begin Date 02/07/2018 End Date 02/07/2018

Name **TUFTS HEALTH TOGETHER WITH CHA**

NPI Phone (888) 257-1985

1618 / 732 Tufts Health Together With CHA member. Tufts Health Together With CHA is an Accountable Care Partnership Plan.

1619 733 For medical service questions, call 1-888-257-1985.

1620 / 734 For behavioral health service questions and authorizations, call Tufts Health Together With CHA at 1-888-257-1985.

1621 735 For claims, policy, or billing questions, call 1-888-257-1985.

Member Payment Responsibility Detail

Patient Paid Amount	Patient Paid Amount Type
Spend Down Amount	
Deductible Amount	Deductible Date
Co-pay Status	Co-pay Cap Status
Restrictive Messages	

Close
Perform Another Eligibility Check

Note: EVS only displays a member's **current** eligibility, not prospective eligibility.

If a member enrolls in a health plan effective March 1, 2018 their new Plan assignment and corresponding messages will not appear in EVS until the date the enrollment takes effect.



13. Wellforce Care Plan – Accountable Care Partnership Plan

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Verify Member Eligibility

Member Information

Eligibility

Dates of Eligibility

Click on the Date Range to view Eligibility information for Member ID

Date Range	Eligibility Status
→ 02/07/2018 02/07/2018	MASSHEALTH STANDARD

The information below refers to the MASSHEALTH STANDARD coverage for 02/07/2018 to 02/07/2018.

Eligibility Restrictive Messages

Restrictive Messages

991 / 991 CERTAIN HSN DENTAL SERVICES AVAILABLE AT COMMUNITY HEALTH CENTERS AND HOSPITAL-BASED HEALTH CENTERS.

List of Managed Care Data (for MCO/ACO)

Name	NPI	Phone	Date Range
→ WELLFORCE CARE PLAN		(855) 508-4715	02/07/2018 02/07/2018

Managed Care Data (for MCO/ACO) Details

Begin Date

02/07/2018

End Date

02/07/2018

Name

WELLFORCE CARE PLAN

NPI

Phone

(855) 508-4715

Restrictive Messages

1622 / 736 Wellforce Care Plan member. Wellforce Care Plan is an Accountable Care Partnership Plan.
1623 / 737 For medical service questions, call 1-855-508-4715.
1624 / 738 For behavioral health service questions and authorizations, call Beacon Health Options at 1-888-877-7183
1625 / 739 For claims, policy, or billing questions, call 1-855-508-4715.

Member Payment Responsibility Detail

Patient Paid Amount	Patient Paid Amount Type
Spend Down Amount	
Deductible Amount	Deductible Date
Co-pay Status	Co-pay Cap Status
Restrictive Messages	

Close

Perform Another Eligibility Check

Note: EVS only displays a member's **current** eligibility, not prospective eligibility.

If a member enrolls in a health plan effective March 1, 2018 their new Plan assignment and corresponding messages will not appear in EVS until the date the enrollment takes effect.



1. Community Care Cooperative (C3) – Primary Care ACO Plan

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Verify Member Eligibility

Member Information **Eligibility**

Dates of Eligibility

Click on the Date Range to view Eligibility information for Member ID

Date Range	Eligibility Status
→ 02/12/2018 02/12/2018	MASSHEALTH STANDARD

The information below refers to the **MASSHEALTH STANDARD** coverage for 02/12/2018 to 02/12/2018.

List of Managed Care Data (for PCC/PCCB)

Legal Name	Site Name	Site Phone	Date Range
→ EAST MOUNTAIN MEDICAL ASS	EAST MOUNTAIN MEDICAL	(413) 528-2418	02/12/2018 02/12/2018

Managed Care Data (for PCC/PCCB) Details

Begin Date 02/12/2018 End Date 02/12/2018

Legal Name **EAST MOUNTAIN MEDICAL ASS**

Site/DBA Name **EAST MOUNTAIN MEDICAL**

NPI 1033278486 Site (413) 528-2418

Site Address **780 MAIN ST
STE 1
GT BARRINGTON, MA 01230**

Restrictive Messages 687 / 687 COMMUNITY CARE COOPERATIVE MEMBER. COMMUNITY CARE COOPERATIVE IS A PRIMARY CARE ACO. CALL PCC ABOVE FOR AUTHORIZATION FOR ALL SERVICES EXCEPT THOSE LISTED IN 130 CMR 450.118(J).

List of Managed Care Data (for MCO/ACO)

Name	NPI	Phone	Date Range
→ COMMUNITY CARE COOPERATIVE (C3)	(866) 676-9226	02/12/2018 02/12/2018	

Managed Care Data (for MCO/ACO) Details

Begin Date 02/12/2018 End Date 02/12/2018

Name **COMMUNITY CARE COOPERATIVE (C3)**

NPI Phone (866) 676-9226

Restrictive Messages 1626 / 740 Community Care Cooperative (C3) member. Community Care Cooperative is a Primary Care ACO.
1627 / 741 For medical service questions, call 1-866-676-9226.
1628 / 742 For claims, referrals, or billing questions, call the MassHealth Customer Service Center at 1-800-841-2900.

List of Behavioral Health

Provider Name	NPI	Provider Phone	Date Range
→ MASSACHUSETTS BEH HLTH PRT	1548385057	(800) 495-0086	02/12/2018 02/12/2018

Behavioral Health Detail

Begin Date 02/12/2018 End Date 02/12/2018

Provider Name **MASSACHUSETTS BEH HLTH PRT**

NPI 1548385057 Provider (800) 495-0086

Restrictive Messages 76 / 525 For behavioral health service questions and authorization, call the Massachusetts Behavioral Health Partnership at 1-800-495-0086.

Note: EVS only displays a member's **current** eligibility, not prospective eligibility.

If a member enrolls in a health plan effective March 1, 2018 their new Plan assignment and corresponding messages will not appear in EVS until the date the enrollment takes effect.



2. Partners Healthcare Choice – Primary Care ACO Plan

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Note: EVS only displays a member's **current** eligibility, not prospective eligibility.

If a member enrolls in a health plan effective March 1, 2018 their new Plan assignment and corresponding messages will not appear in EVS until the date the enrollment takes effect.

Member Information		Eligibility	
Dates of Eligibility			
Click on the Date Range to view Eligibility information for Member ID			
Date Range	Eligibility Status		
→ 02/12/2018 02/12/2018	MASSHEALTH STANDARD		
The information below refers to the MASSHEALTH STANDARD coverage for 02/12/2018 to 02/12/2018.			
Eligibility Restrictive Messages			
Restrictive Messages	991 / 991 CERTAIN HSN DENTAL SERVICES AVAILABLE AT COMMUNITY HEALTH CENTERS AND HOSPITAL-BASED HEALTH CENTERS.		
List of Managed Care Data (for PCC/PCCB)			
Legal Name	Site Name	Site Phone	Date Range
→ BRIGHAM & WOMEN'S PHYSICIAN	BRIGHAM AND WOMEN'S PRIMARY CARE AS	(857) 307-2200	02/12/2018 02/12/2018
Managed Care Data (for PCC/PCCB) Details			
Begin Date	02/12/2018	End Date	02/12/2018
Legal Name	BRIGHAM & WOMEN'S PHYSICIAN		
Site/DBA Name	BRIGHAM AND WOMEN'S PRIMARY CARE AS		
NPI	1033535497	Site Phone	(857) 307-2200
Site Address	600 HUNTINGTON AVE BOSTON, MA 02115		
Restrictive Messages	686 / 686 PARTNERS HEALTHCARE CHOICE MEMBER. PARTNERS HEALTHCARE CHOICE IS A PRIMARY CARE ACO. CALL THE PCC ABOVE FOR AUTHORIZATION FOR ALL SERVICES EXCEPT THOSE LISTED IN 130 CMR 450.118(j).		
List of Managed Care Data (for MCO/ACO)			
Name	NPI	Phone	Date Range
→ PARTNERS HEALTHCARE CHOICE		(800) 231-2722	02/12/2018 02/12/2018
Managed Care Data (for MCO/ACO) Details			
Begin Date	02/12/2018	End Date	02/12/2018
Name	PARTNERS HEALTHCARE CHOICE		
NPI		Phone	(800) 231-2722
Restrictive Messages	1629 / 743 Partners HealthCare Choice member. Partners HealthCare Choice is a Primary Care ACO. 1630 / 744 For medical service questions, call 1-800-231-2722. 1631 / 745 For claims, referrals, or billing questions, call the MassHealth Customer Service Center at 1-800-841-2900.		
List of Behavioral Health			
Provider Name	NPI	Provider Phone	Date Range
→ MASSACHUSETTS BEH HLTH PRT	1548385057	(800) 495-0086	02/12/2018 02/12/2018
Behavioral Health Detail			
Begin Date	02/12/2018	End Date	02/12/2018
Provider Name	MASSACHUSETTS BEH HLTH PRT		
NPI	1548385057	Provider Phone	(800) 495-0086
Restrictive Messages	76 / 525 For behavioral health service questions and authorization, call the Massachusetts Behavioral Health Partnership at 1-800-495-0086.		



3. Steward Health Choice – Primary Care ACO Plan

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Verify Member Eligibility

Member Information **Eligibility**

Dates of Eligibility

Click on the Date Range to view Eligibility information for Member ID

Date Range	Eligibility Status
→ 02/12/2018 02/12/2018	MASSHEALTH STANDARD

The information below refers to the MASSHEALTH STANDARD coverage for 02/12/2018 to 02/12/2018.

Eligibility Restrictive Messages

Restrictive Messages 991 / 991 CERTAIN HSN DENTAL SERVICES AVAILABLE AT COMMUNITY HEALTH CENTERS AND HOSPITAL-BASED HEALTH CENTERS.

List of Managed Care Data (for PCC/PCCB)

Legal Name	Site Name	Site Phone	Date Range
→ ELM ST ADULT MEDICINE,PC	ELM ST ADULT MEDICINE,PC	(413) 586-1100	02/12/2018 02/12/2018

Managed Care Data (for PCC/PCCB) Details

Begin Date 02/12/2018 End Date 02/12/2018

Legal Name ELM ST ADULT MEDICINE,PC

Site/DBA Name ELM ST ADULT MEDICINE,PC

NPI 1306914601 Site (413) 586-1100

Site Address 264 ELM ST STE 10-12

NORTHAMPTON, MA 01060

Restrictive Messages 685 / 685 STEWARD HEALTH CHOICE MEMBER. STEWARD HEALTH CHOICE IS A PRIMARY CARE ACO. CALL THE PCC ABOVE FOR AUTHORIZATION FOR ALL SERVICES EXCEPT THOSE LISTED IN 130 CMR 450.118(J).

List of Managed Care Data (for MCO/ACO)

Name	NPI	Phone	Date Range
→ STEWARD HEALTH CHOICE		(855) 860-4949	02/12/2018 02/12/2018

Managed Care Data (for MCO/ACO) Details

Begin Date 02/12/2018 End Date 02/12/2018

Name STEWARD HEALTH CHOICE

NPI Phone (855) 860-4949

Restrictive Messages 1632 / 746 Steward Health Choice member. Steward Health Choice is a Primary Care ACO.

1633 / 747 For medical service questions, call 1-855-860-4949.

1634 / 748 For claims, referrals, or billing questions, call the MassHealth Customer Service Center at 1-800-841-2900.

List of Behavioral Health

Provider Name	NPI	Provider Phone	Date Range
→ MASSACHUSETTS BEH HLTH PRT	1548385057	(800) 495-0086	02/12/2018 02/12/2018

Behavioral Health Detail

Begin Date 02/12/2018 End Date 02/12/2018

Provider Name MASSACHUSETTS BEH HLTH PRT

NPI 1548385057 Provider (800) 495-0086

Restrictive Messages 76 / 525 For behavioral health service questions and authorization, call the Massachusetts Behavioral Health Partnership at 1-800-495-0086.

Note: EVS only displays a member's **current** eligibility, not prospective eligibility.

If a member enrolls in a health plan effective March 1, 2018 their new Plan assignment and corresponding messages will not appear in EVS until the date the enrollment takes effect.



1. BMC HealthNet Plan – MCO Plan

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Verify Member Eligibility

Member Information
Eligibility

Dates of Eligibility

Click on the Date Range to view Eligibility information for Member ID

Date Range	Eligibility Status
→ 02/08/2018 02/08/2018	MASSHEALTH STANDARD

The information below refers to the **MASSHEALTH STANDARD** coverage for 02/08/2018 to 02/08/2018.

Eligibility Restrictive Messages

Restrictive Messages	246 / 246 EXEMPT FROM COPAY ON PHARMACY SERVICES UNDER 130 CMR 450.130(D).
	186 / 186 EXEMPT FROM COPAY ON NON-PHARMACY SERVICES UNDER 130 CMR 450.130(D).

List of Managed Care Data (for MCO/ACO)

Name	NPI	Phone	Date Range
→ BMC HEALTHNET PLAN		(888) 566-0010	02/08/2018 02/08/2018

Managed Care Data (for MCO/ACO) Details

Begin Date	02/08/2018	End Date	02/08/2018
Name BMC HEALTHNET PLAN			
NPI		Phone (888) 566-0010	
Restrictive Messages 1059 / 618 BMC HealthNet Plan member. BMC HealthNet Plan is an MCO.			
747 / 021 For medical services call 1-888-566-0010. For behavioral health service questions and authorizations call Beacon Health Strategies at 1-888-217-3501.			

Member Payment Responsibility Detail

Patient Paid Amount	Patient Paid Amount Type
Spend Down Amount	
Deductible Amount	Deductible Date
Co-pay Status	Co-pay Cap Status
Restrictive Messages	

Close

Perform Another Eligibility Check

Note: EVS only displays a member's **current** eligibility, not prospective eligibility.

If a member enrolls in a health plan effective March 1, 2018 their new Plan assignment and corresponding messages will not appear in EVS until the date the enrollment takes effect.



2. Tufts Health Together – MCO Plan

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Verify Member Eligibility

Member Information
Eligibility

Dates of Eligibility

Click on the Date Range to view Eligibility information for Member ID

Date Range	Eligibility Status
→ 02/08/2018 02/08/2018	MASSHEALTH STANDARD

The information below refers to the **MASSHEALTH STANDARD** coverage for 02/08/2018 to 02/08/2018.

Eligibility Restrictive Messages

Restrictive Messages

246 / 246 EXEMPT FROM COPAY ON PHARMACY SERVICES UNDER 130 CMR 450.130(D).

186 / 186 EXEMPT FROM COPAY ON NON-PHARMACY SERVICES UNDER 130 CMR 450.130(D).

List of Managed Care Data (for MCO/ACO)

Name	NPI	Phone	Date Range
→ TUFTS HEALTH TOGETHER		(888) 257-1985	02/08/2018 02/08/2018

Managed Care Data (for MCO/ACO) Details

Begin Date 02/08/2018 End Date 02/08/2018

Name **TUFTS HEALTH TOGETHER**

NPI Phone (888) 257-1985

Restrictive Messages

1138 / 616 For medical services call 1-888-257-1985. For behavioral health service questions and authorizations call Tufts Health Together at 1-888-257-1985.

1146 / 056 Tufts Health Together Member. Tufts Health Together is an MCO.

Member Payment Responsibility Detail

Patient Paid Amount	Patient Paid Amount Type
Spend Down Amount	
Deductible Amount	Deductible Date
Co-pay Status	Co-pay Cap Status
Restrictive Messages	

Close
Perform Another Eligibility Check

Note: EVS only displays a member's **current** eligibility, not prospective eligibility.

If a member enrolls in a health plan effective March 1, 2018 their new Plan assignment and corresponding messages will not appear in EVS until the date the enrollment takes effect.



Primary Care Clinician (PCC) Plan and Behavioral Health

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Verify Member Eligibility

Member Information
Eligibility

Dates of Eligibility

Click on the Date Range to view Eligibility information for Member ID

Date Range	Eligibility Status
→ 02/08/2018 02/08/2018	MASSHEALTH STANDARD

The information below refers to the MASSHEALTH STANDARD coverage for 02/08/2018 to 02/08/2018.

Eligibility Restrictive Messages

Restrictive Messages 246 / 246 EXEMPT FROM COPAY ON PHARMACY SERVICES UNDER 130 CMR 450.130(D).
186 / 186 EXEMPT FROM COPAY ON NON-PHARMACY SERVICES UNDER 130 CMR 450.130(D).

List of Managed Care Data (for PCC/PCCB)

Legal Name	Site Name	Site Phone	Date Range
→ HOLYOKE HEALTH CENTER INC	HOLYOKE HEALTH CENTER	(413) 420-2200	02/08/2018 02/08/2018

Managed Care Data (for PCC/PCCB) Details

Begin Date 02/08/2018 End Date 02/08/2018

Legal Name HOLYOKE HEALTH CENTER INC

Site/DBA Name HOLYOKE HEALTH CENTER

NPI 1740271022 Site (413) 420-2200 Phone

Site Address 230 MAPLE ST
PO BOX 6260
HOLYOKE, MA 01040

Restrictive Messages 461 / 461 PRIMARY CARE CLINICIAN(PCC) PLAN MEMBER. CALL PCC FOR AUTHORIZATION FOR ALL SERVICES EXCEPT THOSE LISTED IN 130 CMR 450.118(J).

List of Behavioral Health

Provider Name	NPI	Provider Phone	Date Range
→ MASSACHUSETTS BEH HLTH PRT	1548385057	(800) 495-0086	02/12/2018 02/12/2018

Behavioral Health Detail

Begin Date 02/12/2018 End Date 02/12/2018

Provider Name MASSACHUSETTS BEH HLTH PRT

NPI 1548385057 Provider (800) 495-0086 Phone

Restrictive Messages 76 / 525 For behavioral health service questions and authorization, call the Massachusetts Behavioral Health Partnership at 1-800-495-0086.

Member Payment Responsibility Detail

Patient Paid Amount	Patient Paid Amount Type
Spend Down Amount	
Deductible Amount	Deductible Date
Co-pay Status	Co-pay Cap Status
Restrictive Messages	

Close
Perform Another Eligibility Check

Note: EVS only displays a member's **current** eligibility, not prospective eligibility.

If a member enrolls in a health plan effective March 1, 2018 their new Plan assignment and corresponding messages will not appear in EVS until the date the enrollment takes effect.